

**BADGERCARE PLUS CORE PLAN FOR CHILDLESS ADULTS  
STATE/COUNTY PLANNING TEAM**

October 9, 2008; 9 a.m. – 12 noon  
Dane County Job Center “Ballroom”

Meeting Minutes

Attendees:

Doreen Lang – Wood County  
Liz Maloch – Sheboygan County  
Paula Roberts – Milwaukee County  
Cindy Sutton – Rock County  
Gordon Burdick – Dane County  
Sara Shackleton – Dane County  
Joanne Jaehnke – Dane County  
Sue Kaufman – Racine County  
Wendy Metcalfe – Columbia County  
Debbie Gloudemans – Outagamie County  
Barb Honsa – DHS Regional Office  
Sara Edmonds, Amy Mendel-Clemens, Vicki Jessup, Angie Dombrowicki, Jim Jones, Theresa Fosbinder (facilitator), Linda Auchue, Autumn Arnold – DHS Central Office

**1) There was a welcome and introductions, meeting background and objectives were discussed by Jim and Angie.** Jim stressed that decisions have already been made in terms of the fact that there will be a health care program for the childless adult population (the BadgerCare Plus Core plan for Childless Adults), and that this and other programs for this population will be managed centrally. The purpose of the meeting is not to revisit those decisions, but to come up with issues, questions, ideas and suggestions for implementing this model in a way that ensures that local agencies and the Enrollment Support Center (ESC) to work effectively to serve customers.

**2) A presentation (Attachment 1) was reviewed.**

“The Badger CarePlus Core Plan for Childless Adults – what is it, how will services be delivered, when is it happening, and what is the impact on the local agency?”

During the presentation, the following discussions occurred:

Regarding ESC potential processing of TB related spouses – agencies advised that the ESC needs to think about the mechanics of this, including relationships with Public Health, visits.

Agencies advised that FPWs tend to reapply – instead of doing reviews, so there are not a lot of these at review. They advised that the ESC will need to work

closely with Planned Parenthood, other Family Planning providers. They noted that lots of FPW apps are still done on paper, there is some ACCESS reluctance. In Milwaukee they bundle and hold the applications and many come in at once.

Question: In a Dane County type model where people are referred to a computer, how much do you tell them - before you send them to the computer - about what the rest of the process will be, if you don't know if they are a CLA yet or not? Does this mean someone has to do the screening? Dane County indicated they will take this information back and think about how the upfront process will work in their agency.

It was noted that there may be a need for bigger front end effort - processes will have to change, where and how to use the screener.

Question: How do we change the cultural expectations for customers (so they know where to access services)?

- Brochures/ tear offs/ posters
- Enlist other county agencies to communicate
- Make the screener stand alone
- Conduct outreach, especially with providers,
- Install more PCs (state had some to give but local IT people did not want to install them – see Jim if you are still interested in perusing).

Concerns were raised about initial confusion – “mixed up” verification – agencies will need to scan into ECF and let each other know. There will be learning curve issues. “Scan first” (no association needed with a case) will be key – this process will be implemented with CLA. Also there may be a need for agencies to prioritize this type of scanning over other that they may have waiting. It was noted that scanning is a workload issue - not an issue of equipment – more of a manpower issue. If scanning is not possible, agencies could fax to ESC instead, although this is not preferred. If more/better scanners would help, let DHS know. Let us know what you want and what the rationale is. DHS will send out this info as part of admin/ops memos.

An idea was discussed – we could send a central office “floater” to visit and assist agencies after implementation, also to clinics. This would be “on the spot outreach”.

We could send out letters to CLAs to tell them about new process – however returned mail is an issue.

There was discussion about number of participants and potential pent up demand – there are estimated 81,000 people in this population and has been estimated that half will apply. (It was noted that these numbers were based on data from other states, also the fact that applicants have to “buy it first”, plus access/coverage requirements may deter some).

There was a request to identify by county which of the cases they have now that will be going to Enrollment Services. DHS agreed to create these reports.

Counties indicated they may need to “run interference” to help determine where a customer should be served, DHS indicated that it is also OK to just refer people directly to Enrollment Services.

Concerns were expressed about verification – clearly label communication so customer knows where to send it. If a customer drops off verification at agency, they should scan if they can, or mail or fax to Enrollment Services.

Agencies stated they need to be able to identify in CARES if cases are theirs or Enrollment Center’s (worker number, etc.). DHS said this will be possible.

There was discussion of Youths Existing Out of Home Care (YEOHCs) – need to keep them on BC+, not CLA – need to make sure they are identified as such. Master Customer Index (MCI) /WISACWIS will help with this.

### **3) There was discussion and documentation of specific issues/concerns and ideas for successful implementation**

#### ***Homeless Mail Pickup***

It was noted that Dane County has agreements with 4 agencies – Hospitality House, Salvation Army, YWCA, Jewish Social Services – to be able to pick up homeless mail there. We could set up this type of arrangement for them and other agencies. Think about using c/o – send this idea out to other agencies.

#### ***FSET***

- Referrals – will be handled in CARES as it is now.
- There was discussion about “marketing” to people who do not volunteer.
- When local agencies saw them at interview, they told them benefits of FSET, sometimes walked them over to FSET. Enrollment Services can do some of this in FS phone interview. Also agencies should be able to use WPFN to see all statuses as is done now. DHS staff will follow up to make sure these processes will still work.
- Consideration – 2010 FSET dollars will be based on 09 participation?.

#### ***Vault cards***

- If needed, how does Enrollment Services let county know? Expedited issuance does not mean that you have to do a vault card.
- It was noted that e-funds tells clients to call and get vault cards even though local agencies try to minimize issuance.
- Idea – do vault cards at Enrollment Services, then send priority mail. But can’t do this because the person has to be there in person to PIN the card.

- ESC will minimize vault card issuance – if they are needed we will contact local agency by phone or email – they have to do them the same day.
- Issue – if people present themselves and say they want a vault card but no referral has been received, what should happen – who tells them if they should issue?

**4) Next steps and follow-up activities for this group were discussed.**

- DHS will get the BC+ marketing items to local agencies (pencils, etc.)
- Agencies can go back and discuss this meeting information with others in their agencies, then this group will meet again. One activity may be to review Administrator's /Operations Memos and/or other communications before they go out.
- In the meantime, send ideas for client education tools to Theresa, also send her ideas for future agenda items. Her email address is Fosbitl@dhs.wisconsin.gov
- Angie will send the draft GA letter that is going out to counties to this group.

Slide 1

**BadgerCare Plus Core  
Plan for Childless  
Adults**

**State/County Planning Team**

October 9, 2008  
9 a.m. – 12 noon  
Dane County Job Center  
“Ballroom”

**BADGERCARE+**

## Slide 2

### **ATTENDEES**

- Doreen Lang – Wood County
- Liz Maloch – Sheboygan County
- Paula Roberts – Milwaukee County
- Cindy Sutton – Rock County
- Gordon Burdick – Dane County
- Sara Shackleton – Dane County
- Joanne Jaehnke – Dane County
- Sue Kaufman – Racine County
- Wendy Metcalfe – Columbia County
- Debbie Gloudemans – Outagamie County
- Barb Honsa – DHS Regional Office
- Sara Edmonds, Amy Mendel-Clemens, Vicki Jessup, Angie Dombrowicki, Jim Jones, Theresa Fosbinder (facilitator), Linda Auchue – DHS Central Office

## AGENDA

- 9:00 – 9:15
  - Welcome and introductions, meeting background and objectives (Angie)
- 9:15-10:15
  - The Badger CarePlus Core Plan for Childless Adults – what is it, how will services be delivered, when is it happening, and what is the impact on the local agency? (Angie and state staff)
- 10:15-10:30
  - Break
- 10:30-11:45
  - Discussion and documentation of potential issues/concerns, and processes needed for local agencies and the Enrollment Support Center to work effectively to serve customers.
- 11:45 – 12:00  
Next steps (All)

## **Meeting Background and Objectives**

- Background: This group was formed at the request of the IMAC to look at the interaction between the local agencies and the service delivery process for the “childless adults” population.
- Objectives
  - For DHS staff to convey information and expectations to local agency representatives about the implementation of the BC+ Core Plan for Childless Adults (BC+ CLA) and service delivery to the Childless Adults population via centralized the Enrollment Support Center;
  - For local agency staff to give input about application, case transfer, communication and other processes needed for local agencies and the Enrollment Support Center to work effectively to serve customers.

The BadgerCarePlus Core Plan  
for Childless Adults

What is it, how will services be  
delivered, when is it happening,  
and what are some impacts on  
the local agency?

## **WHAT IS IT?**

- Path to Comprehensive Health Care Reform
- Target Population
- Benefit Package
- Cost Sharing
- Enrollment Requirements
- Service Delivery/Central Application Processing
- Implementation and Timeline
  - General Relief/Assistance Recipients
  - New Enrollees

## BadgerCare Plus Core Plan for Childless Adults

- Path to Comprehensive Health Care Reform
  - Phase I = BC+ Health Insurance for All Kids (2/1/08)
  - Phase II = BC+ Core Plan Childless Adults (Existing General Relief/Assistance population 1/1/09; New Applicants 4/1/09)
  - Phase III = BadgerChoice / Small Business Health Insurance Reform (under development)
  - Result:
    - 98% of Wisconsin residents will have access to affordable insurance
    - Lower costs for small businesses and their employees



## **BadgerCare Plus Core Plan for Childless Adults**

- Target Population
  - Chronically uninsured
  - High users of uncompensated care
  - Gross income at or below 200% of FPL
  - Ages 19 – 64
  - Not parent/caretaker of children or pregnant
  - Not eligible for any type of full benefit Medicaid
  - Not *covered* under private health insurance now or in the previous 12 months
  - No access to **employer sponsored** health insurance for previous 12 months
  - Approximately 81,000 potential members
    - Approximately 55% are under age 45; the remainder are 45-64 years of age
    - Approximately 74% are not married
    - 60% are employed, but have no employee sponsored health insurance

## **BadgerCare Plus Core Plan for Childless Adults**

- **Benefit Package**
  - Less generous than Medicaid or BC+ Benchmark Plan and focused on preventive care
  - Benefits designed as HMO benefit:
    - Physician Services
    - Diagnostic Services
    - Inpatient stays & limited outpatient visits
    - Therapies (limited number)
    - Durable medical equipment
    - Dental services, limited for emergency services only
    - Emergency outpatient
  - Fee-for-Service components:
    - Generic Drugs (BadgerRx Gold for brand name drugs)
  - Remain eligible for:
    - Family Planning Waiver
    - County-based mental health and substance abuse

## BadgerCare Plus Core Plan for Childless Adults

- Cost sharing
  - Application Fee (*non-refundable*)
  - Co-Payments

Federal Poverty Level	Application Fee		Non-Institutional Services	Drugs	Outpatient Hospital	Emergency Services	Inpatient Hospital
	Tier 1	Tier 2					
0-100%	\$60	\$75	Nominal	\$5	Nominal	Nominal	Nominal
100-200%	\$60	\$75	Nominal	\$5	\$15	\$60	\$100

- Nominal co-payments range from \$0.50 - \$3
- Co-payments are waived for preventive services
- \$20 monthly cost-sharing cap for generic drugs
- Cost-sharing will be capped consistent with the Standard Plan

## **BadgerCare Plus Core Plan for Childless Adults**

- Enrollment Requirements
  - Managed Care Delivery Model
    - BadgerCare Plus Childless Adults will be delivered through HMOs – no fee for service
    - Participants will select a HMO at the time of application (with 90 days to change their choice)
    - Lower application fee for Tier 1 selection (Tiers effective 7/1/09)
    - Eligibility and HMO enrollment begin dates are linked – begins after selection on the next 1<sup>st</sup> or 15<sup>th</sup> of month
  - Health Needs Assessment – enrollment requirement
  - Physical Exam - first year requirement
    - Failure to obtain = loss of eligibility for 6 months (*with good cause exemptions*)
    - HMOs required to provide access for exams to avoid penalty<sub>11</sub>

## **BadgerCare Plus Core Plan for Childless Adults**

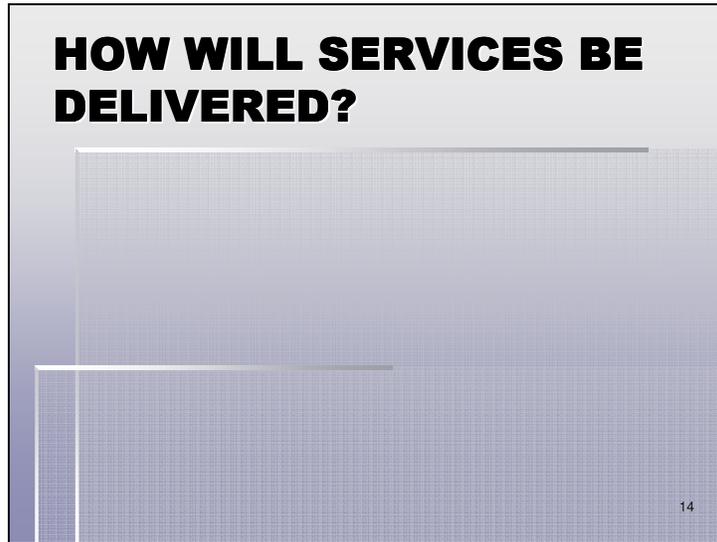
- Certification period and closure reasons
  - Childless adults remain eligible during a one year certification period, regardless of income changes, unless they:
    - Turn age 65
    - Become eligible for Medicare, Medicaid or SCHIP coverage
    - No longer reside in WI
    - Become incarcerated
    - Obtain health insurance coverage

## **BadgerCare Plus Core Plus Plan for Childless Adults**

- In the summer or fall of 2009, a new component will be added which will allow employers to buy additional benefits for their employees who are on the core plan.

Slide 14

**HOW WILL SERVICES BE DELIVERED?**



14

## **Enrollment Support Center**

- One-stop centralized shop for application, enrollment, renewal, and member service information – the Enrollment Support Center (ESC).
  - People can apply for benefits or renew online via ACCESS or by phone.
- The Enrollment Support Center is being implemented to help alleviate the workload concerns of local agencies.

## **Enrollment Support Center**

- The Enrollment Support Center will include these functions, managed in conjunction with a vendor:
  - Mailroom and scanning services
  - Application and renewal services
  - Eligibility processing services
  - HMO Enrollment services
  - Member services
  - Fiscal services
  - Other services, including benefit recovery, fair hearing and grievances, outreach and field representatives

## **Enrollment Support Center**

- **All** “childless adults”, ages 19 to 64, will be served by the Enrollment Support Center.
- The Enrollment Support Center will be responsible for managing these programs:
  - The BadgerCare Plus Core Plan for Childless Adults (BC+ CLA),
  - FoodShare
  - Family Planning Waiver for ages 19-44
  - Other programs for spouses except Long Term Care (including institutions), W-2 and Child Care.

# Slide 18

CLA with Spouse in:	Will ESC process spouse's program?
Family Planning Waiver*	Yes
FoodShare*	Yes
EBD Medicaid	Yes
Nursing Home/Institutional	No
Long Term Care/Home and Community Based Waivers/Managed LTC	No
Medicaid Purchase Plan	Yes
Medicare Premium Assistance	Yes
Emergency Medicaid	Yes
TB-Related	Yes
BadgerCare+ Families	N/A
BC+ for Pregnant Women	Yes
Child Care	No
W-2	No
Caretaker Supplement	N/A
Well Woman Medicaid	No

\* The ESC will process FoodShare and FPW for all childless adults

## **WHEN IS IT HAPPENING?**

- GA Medical Recipients
  - 12/08 conversion for January 1, 2009 BC+CLA benefits
  - These recipients will have “transitional” CLA (TCLA) status and will be managed via a separate database
- New BC+CLA Enrollees
  - Persons may begin submitting BC+ CLA applications to the Enrollment Support Center in March 2009 for April 2009 enrollment.

## **WHAT ARE SOME IMPACTS ON LOCAL AGENCIES?**

- Timing
- Overall Impact
- Specific Impacts

## Timing - TCLAs

- TCLAs
  - These recipients will be managed via a separate database.
    - If TCLAs are on FS or FPW at the time of transition, the FS/FPW case will be managed by the local agency until the first BC+CLA renewal.
    - If a TCLA is not on FS/FPW at the time of the transition and wants to apply for FS in Jan- March of 2009, the local agency will take the FS application and keep it until the CLA renewal.
    - If a TCLA is not on FS/FPW at the time of the transition and wants to apply for FS/FPW on April 1 or after, the Enrollment Support Center will take the FS application.

## **Timing – New Applicants**

- New BC+ CLA applicants
  - Persons may begin submitting BC+ Core Plan applications to the Enrollment Support Center in March 2009 for April 2009 enrollment.
  - If these applications include FS or FPW, those programs will also be processed by the Enrollment Support Center beginning April 1 – March processes for these programs are TBD.

## Timing – Existing Cases

- Existing FoodShare and Family Planning Waiver cases with childless adults (ages 19 to 64):
  - These are currently managed by local IM agencies, and will be transitioned to the Enrollment Support Center if/when they apply for the BC+ Core Plan, or should be transferred by the local agency after doing the next scheduled FoodShare or Family Planning Waiver review.
  - Local IM agencies must not shorten current certification periods for this population in order to divest themselves of these cases before their next scheduled renewal for FoodShare or Family Planning Waiver.

## Overall Impact

- As discussed, the new BC+ Core Plan for Childless Adults will be available to the appropriate population.
- As discussed, the childless adult population will receive services via the Enrollment Support Center.
- Also: the Federal Food Stamp project area will change from counties to statewide. This:
  - Brings us back into compliance with federal regulations because we won't be shortening certification periods
  - Allows us to process applications from anyone in the state
  - Allows us to process FS for the childless adult population centrally
  - Means that customers do not have to do a review each time they move.

## Specific Impacts

- 1) Some CWW/CARES changes will benefit local agencies:
  - Inbox search criteria will be enhanced to recognize duplicate ACCESS items and existing CARES individuals
  - The Application Summary page will show detailed status of related unprocessed ACCESS items and provide a brief report on all individuals on the application that are already known to CARES
  - All workers will be able to add comments to an application that will get carried forward to the case comments
  - A new homeless indicator will be displayed in Client Registration

## **Specific Impacts, con't**

### CARES/CWW changes, con't:

- Case transfer enhancements will be made to allow transfer to the ESC.
- New alerts will be sent to the local agency worker to transfer cases to the ESC as appropriate.
- A new screening tool and transfer process will be implemented to recognize CLAs who contact them, and to create and transfer RFAs to the ESC (see next two slides).

## Screening for BC+ Core Plan for CLAs (County)

The screenshot displays the 'CARES Worker Web' interface. The top navigation bar shows the user ID 'XCTC25', user name 'P.PALEY', and a 'Quick Select' dropdown set to 'CASE/PFA'. The date '07/25/2008' is visible in the top right corner. A left-hand navigation menu lists various system functions such as 'Client Registration', 'Basic Information', and 'Program Requests'. The main content area is titled 'CLA Screening' and features a green banner with the message: 'The following events have occurred: AE168: The PP and PP's spouse do not meet the CLA criteria.' Below the banner is a 'CLA Check' section containing several screening questions with 'Yes' or 'No' dropdown menus. The questions include: 'Are you married and living with your spouse?', 'Are you or your spouse the parent or stepparent of a child under 19 who lives with you at least 40% of the time?', 'Are you or your spouse caring for a child under 19 who lives with you at least 40% of the time and is related to you in another way?', 'Are you aged 19 through 64?', 'Is your spouse aged 19 through 64?', 'Has the Social Security Administration made an official decision that you are blind or disabled?', and 'Has the Social Security Administration made an official decision that your spouse is blind or disabled?'. At the bottom of the screen, there are two radio button options: 'Create FFA to send to DCSC' and 'Return to Search Results'. A 'Perform CLA Screening' button is also present.

## **Transferring RFAs**

- Based on the outcome of the screening, the Enrollment Support Center or local agency will know if they should continue processing, or create and transfer a “Request for Assistance” (RFA) to the other agency.
  - With implementation of the BC+ Core Plan for CLAs, we will implement the capacity to transfer Requests for Assistance (RFAs) – a new feature in CWW that local agencies have been asking for some time.

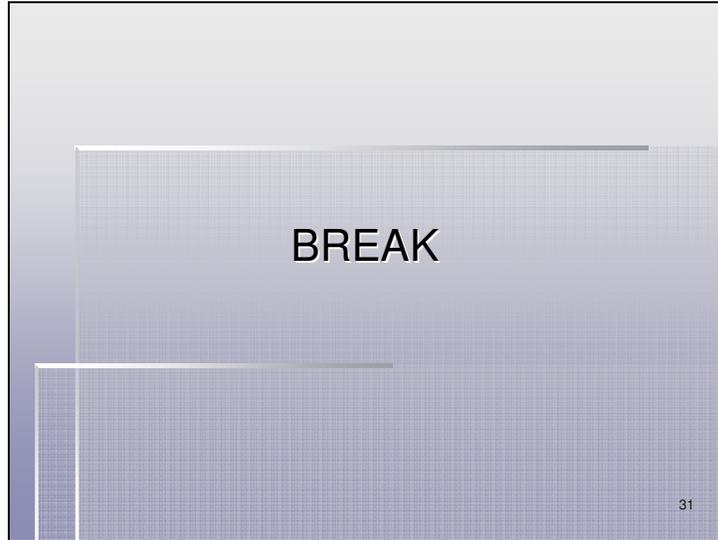
## **Specific Requirements, con't**

- 2) Agencies should have a phone, a scanner and a computer available to refer people directly to the ESC if appropriate.
- 3) Agencies will serve as mailing address for BC+ CLA homeless participants.
- 4) Agencies will serve as pick up point for FS vault cards for BC+ CLA members.
- 5) Agencies will serve as FSET management for BC+CLA participants.
- 6) The counties may need to pay for FS drug testing for all FS recipients, whether the case is managed at the ESC or in the county.

## **Specific Requirements, con't**

- 7) Local agencies and the Enrollment Support Center will transfer cases back and forth and communicate appropriately.

Slide 31

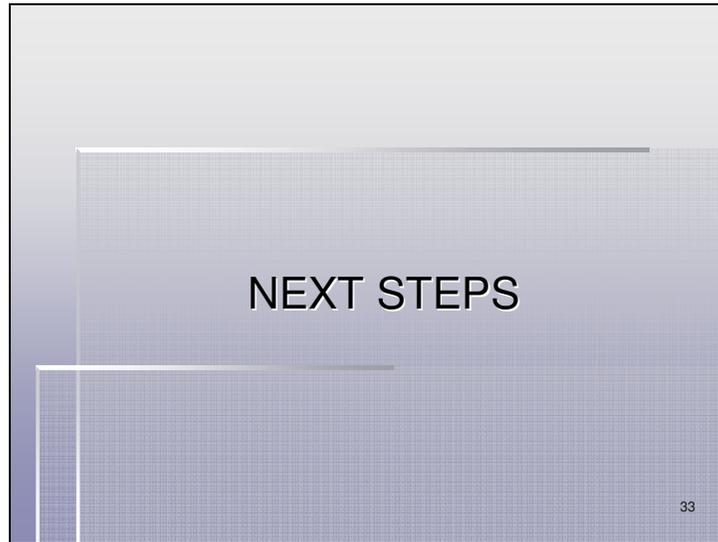




DISCUSSION AND DOCUMENTATION OF  
POTENTIAL ISSUES/CONCERNS  
&  
PROCESSES NEEDED FOR LOCAL  
AGENCIES AND THE ENROLLMENT  
SUPPORT CENTER TO WORK  
EFFECTIVELY TO SERVE CUSTOMERS

32

Slide 33



Jim